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APPEARANCE						
		United States	Bankruptcy Court			
	For the	Northern	District of	Illinois		
In re	_)		_	
) Case No.			
)			
)			
I, THE UNDERSIG	NED, HEREBY FIL	E MY APPEARA	NCE AS ATTORNEY FO	R		
Print Name on this Line			Firm Name		_	
			FIRM ID NUME	BER:		
Signature			-			
ATTORNEY ID NUMBER			Street Address	S		
			City	State	Zip	
			_	JULU	ΖΙΡ	
			Telephone			
Trial Attorneys*						
	Print Name		_			
*Request is mad	le for trial attorr	ney to avoid p	ossible conflicts in se	cheduling.		
DATED:						